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| <b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b><br><b>FY 2008</b><br><i>(Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)</i>  |  | Docket Number (Optional)<br>52003-8001.US01 |
|--|--|---|
| Application Number<br>09/740,615   | Filed<br>December 18, 2000   |   |
| For Plasmon Resonant Particles, Methods and Apparatus  |  |   |
| Art Unit 1641  | Confirmation No. 1773  | Examiner : Lam A.                           |
| This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.   |  |   |
| The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):  |  |   |
|  | Fee  | Small Entity Fee                            |
| <input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1))  | \$120  | \$60 \$ 60.00                               |
| <input type="checkbox"/> Two months (37 CFR 1.17(a)(2))  | \$460  | \$230 \$                                    |
| <input type="checkbox"/> Three months (37 CFR 1.17(a)(3))  | \$1050   | \$525 \$                                    |
| <input type="checkbox"/> Four months (37 CFR 1.17(a)(4))   | \$1640   | \$820 \$                                    |
| <input type="checkbox"/> Five months (37 CFR 1.17(a)(5))   | \$2230   | \$1115 \$                                   |
| <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.<br><input type="checkbox"/> A check in the amount of the fee is enclosed.<br><input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.<br><input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.<br><input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 50-2207 .<br><b>WARNING:</b> Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. |  |   |
| I am the   | <input type="checkbox"/> applicant/inventor.<br><input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71.<br>Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).<br><input checked="" type="checkbox"/> attorney or agent of record. Registration Number 47,139<br><input type="checkbox"/> attorney or agent under 37 CFR 1.34.<br>Registration number if acting under 37 CFR 1.34 _____ |   |
| _____<br>Signature   |  | _____<br>Date                               |
| Stephen Todd<br>Typed or printed name  |  | 650 838-4300<br>Telephone Number            |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.  |  |   |
| <input checked="" type="checkbox"/> Total of one form is submitted.  |  |   |